pplication or Docket Number

09/6227.06

## PATENT APPLICATION . \_\_ DETERMINATION RECORD Effective December 29, 1999

CLAIMS AS FILED - PART I (Column 1) (Column 2)									L'ENTITY	OF	OTHE	HER THAN	
FOR			IUMBER FILE	)	NUMBER	EXTRA	1 1	TYPE	FEE	7	RATE	FEE	
BASIC FEE										OF	<b>FR33</b>	g	
T	OTAL CLAIMS		15 min	us 20=		Name of the state	67	X\$ 9=		OR OR	the country design	840	
INDEPENDENT CLAIMS minus 3 = *						j j		<del> </del>	<b>-1</b> . ,		↓		
MULTIPLE DEPENDENT CLAIM PRESENT							3.965	X39=		OR	<b>-</b>	<u> </u>	
If the difference in column 1 is loss than zero anter #07 in and							969	+130=		OR	+260=		
* If the difference in column 1 is less than zero, enter "0" in column 2							TOTAL		OR	TOTAL	840		
CLAMS AS AMENDED - PART II (Column 1) (Column 2) (Column 3)								011411				THAN	
<b>-</b>		CLAIN	AS ASSESSED AS	<b>33</b>	Column 2) HIGHEST	(Column 3)	r	SMALL	ENTITY	OR T	SMALL		
		REMAIN AFTE AMENDM	R	PF	NUMBER REVIOUSLY PAID FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	1. 15	Minus	**(	20_	= '	İ	X\$ 9=		OR	X\$18=	:	
	Independent	* /	Minus OF MULTIPLE D	*** EDEMO	ENE OLAU	=		<b>X</b> 39=		OR	X78=		
	THOTTIESE	INTAHON	OF MULTIPLE D	EPEND	ENI CLAIM			+130=		OR	+260=		
				· .		A Company of the Comp	A	TOTAL		OR	TOTAL		
7		(Column			olumn 2)	(Column 3)		<b>学学道</b>	<b>5</b> : 34				
		REMAIN! AFTEF AMENDM	NG R	PRI	IIGHEST IUMBER EVIOUSLY AID FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		(RATE	ADDI- TIONAL FEE	
	Total :		∯r Minus				3	X\$ 9=		OR	X\$18=1		
ŀ	Independent	• 7 HOUSE	Minus 🦠	444		= 3.	3	X39=		OR	X78=3		
İ	FIRST PRESE	NTATION C	F MULTIPLE DI	PENDE	ENT CLAIM			\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	OR	^/0≒3		
							L	130=		OR	+260=		
				+ 474 			AD	TOTAL DIT. FEE	野田樓	OR A	DDIT. FEEL	Will William	
le d		1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1	有法院										
		CLAIMS REMAININ AFTER AMENDME	lG .	NO PRE	GHEST JMBER VIOUSLY JD FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	<b>Total</b>	•	Minus	**		=	5	(\$ 9=		$^{\circ}$	X\$18=	A STATE	
		* .	Minus	***		<b>=</b>	1	(39=	·	OR		34	
Ľ	IRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM						<u> </u>			OR	X78=	. 12	
If the entry in column 1 is less than the entry in column 2, write "0" in column 3.							<u> </u>	130=	Segar List et e	OR	+260=		
A١	he "Highest Num the "Highest Num	ADD	TOTAL IT. FEE	vs ali	OR A	TOTAL DDIT. FEE	一种病						
Th	e "Highest Numb	er Previous	Paid For" (Total o	r Indepe	ndent) is the i	nighest number ƙ			opriate box	in colu	nn 1.	200	